10/813959

Application or Docket Number

LNX-0070

## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE OR			OTHER THAN SMALL ENTITY	
7	OTAL CLAIMS	• •	$\square$		· l			RATE	FEE	7	RATE	FEE
F	OR		NUMBER FILED		NUMBER EXTRA			BASIC FE	385.00	OR	BASIC FEE	770.00
T	OTAL CHARGE	/7 minus 20>		. 0			XS 9=	v.	OR	X\$18=		
	DEPENDENT C			ninus 3 ≥	· 0 ·			X43=	10	OR	X86°	
M	ATIPLE DEPE	NDENT CLAIM P	RESENT	ESENT				+145=	0	OR	+290=	
If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL	385	OR	TOTAL	
<u>.</u>	13/06 C	(Column 1)	Γ II nn 2)	(Column 3)		SMALL	ENTITY	OR	OTHER SMALL			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	JER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 17	Minus	- 2	0	. 6		X\$ 9=	1	OR	X\$18=	7
PAR	Independent	NTATION OF MI	Minus	2	<u>,</u>	1-16		X43=		OR	X86=	
-	· ·	NIAHON OF MI	DETIPLE DE	PENDENI	CLAIM		1	+145=		OR	+290=	
2	3-160	A	TOYAL DOIT, FEE		OR	. YOYAL ADDIT, FEE	./					
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVIOUS PAID F	USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
2	Total		Minses	-,76	).		L	X\$ 9=		OR	X\$18a	•
- Commercial Commercia	Independent FIRST PRESE	NTATION OF MU	Minus LTIPLE DET	ENDENT	CLAIM	•		X43= ·	•	OR	_X86=	
					77			+145=		OR	+290=	
								TOTAL DOTT. FEE		ŌR',	TOTAL LODIT. FEE	
		(Column 1).		(Column	n2)	(Column 3)				<i>:</i> ·	•	
AMENDMENIC		CLAIMS . REMAINING . AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID P	ER ISLY	PRESENT EXTRA		RATE	ADDI- TIQNAL FEE		RATE	ADDI- TIONAL FEE
	Total ::	•	Minus :	•		<b>1</b> ,		X\$ 9=		OR	X\$18=	::::::
	Independent		Minus	***			1	X43=	7		X88=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					:- []	-			OR		
								+145=		OR	+290=	· .
	the Wighest Nur the Wighest Nur	on 1 is less than the ober Previously Poli ober Previously Peld ber Previously Peld	d For IN THE d For IN THE	S SPACE IS I	ess that	20, enter "20." 3, enter "3."	. ~	TOTAL OTT. FEE			TOTAL DOTT. FEEL Into 1.	